


**APPLICATION DATA SHEET**

Electronic Version v14

Stylesheet Version v14.0

<b>Title of Invention</b>	SYSTEM AND METHOD FOR TRACKING CHECKS		
Application Type : regular, utility			
Attorney Docket Number : F-628			
Correspondence address:			
Customer Number:		919	
Inventors Information:			
<u>Inventor 1:</u>			
<b>Applicant Authority Type:</b>		Inventor	
<b>Citizenship:</b>		TR	
<b>Name prefix:</b>		Mr.	
<b>Given Name:</b>		Yakup	
<b>Middle Name:</b>		J.	
<b>Family Name:</b>		Igval	
<b>Residence:</b>			
<b>City of Residence:</b>		Milford	
<b>State of Residence:</b>		CT	
<b>Country of Residence:</b>		US	
<b>Address-1 of Mailing Address:</b>		19 Marie Street	
<b>Address-2 of Mailing Address:</b>			
<b>City of Mailing Address:</b>		Milford	
<b>State of Mailing Address:</b>		CT	
<b>Postal Code of Mailing Address:</b>		06460	
<b>Country of Mailing Address:</b>		US	
<b>Phone:</b>			
<b>Fax:</b>			
<b>E-mail:</b>			
<u>Inventor 2:</u>			
<b>Applicant Authority Type:</b>		Inventor	
<b>Citizenship:</b>		US	
<b>Name prefix:</b>		Mr.	

**Given Name:** Richard  
**Middle Name:** W.  
**Family Name:** Heiden  
**Residence:**  
**City of Residence:** Huntington  
**State of Residence:** CT  
**Country of Residence:** US  
**Address-1 of Mailing Address:** 4 Deborah Drive  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** Huntington  
**State of Mailing Address:** CT  
**Postal Code of Mailing Address:** 06484  
**Country of Mailing Address:** US  
**Phone:**  
**Fax:**  
**E-mail:**

**Attorney Information:**

practitioner(s) at Customer Number:

919



as our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

**Publication Information:**

**Suggested Figure for Publication - 1**

**Suggested Classification -**

**Suggested Technology Center -**

**Total Number of Drawing Sheets -**

**Assignee 1:**

**Organization Name:** Pitney Bowes Inc.  
**Address-1 of Mailing Address:** 1 Elmcroft Road  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** Stamford  
**State of Mailing Address:** CT  
**Postal Code of Mailing Address:** 06926  
**Country of Mailing Address:** US  
**Phone:**  
**Fax:**  
**E-mail:**